

**DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION**  
**(English Language Declaration)**

File No. 9789.3801

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **MEDICAL X-RAY DIGITIZING AND CHART STORAGE SYSTEM**, the specification of which (check one):

☒ [X] is attached hereto

☐ [ ] was filed on      as Serial No.      and was amended on      (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability, as defined in Title 37, Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

<u>Prior Foreign Application(s)</u>			<u>Priority Claimed</u>	
<u>Number</u>	<u>Country</u>	<u>Day/Month/Year</u>	<u>Yes</u>	<u>No</u>
			[ ]	[ ]
			[ ]	[ ]
			[ ]	[ ]

I hereby claim the benefit under Title 35, United States Code 120, of any United States application(s) or PCT international application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code 112, I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations 1.56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<u>Serial No.</u>	<u>Filing Date</u>	<u>Status</u>
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith along with any and all foreign applications filed and foreign patents issued therefrom.

Barry L. Haley, Registration No. 25,339  
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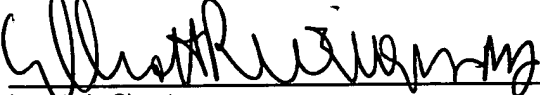
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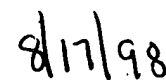
Full Name of Sole or First Inventor



Inventor's Signature

U.S.A.

Citizenship



Date

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Full Name of Second Joint Inventor, if any

Citizenship

Second Inventor's Signature

Date

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Full Name of Third Joint Inventor, if any

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Third Inventor's Signature

Date

Residence

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967230-TELEFON

**Attorney's**

Serial No. or Patent No.: To Be Assigned

Docket: **9789.3801**

Filed or Issued: Herewith

For: MEDICAL X-RAY DIGITIZING AND CHART STORAGE SYSTEM

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS**  
**(37 CFR 1.9(c) and 1.27(b)) - INDEPENDENT INVENTOR**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under §41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled **MEDICAL X-RAY DIGITIZING NAD CHART STORAGE SYSTEM** described in

☒ the specification filed herewith

[ ] application serial no. , filed

☐ patent no. , issued

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

☒ no such person, concern, or organization

☐ persons, concerns, or organizations listed below\*

NOTE: Separate Verified Statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

**FULL NAME:**

**ADDRESS:**

☐ INDIVIDUAL      ☐ SMALL BUSINESS CONCERN      ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

**Dr. Elliott B. Weinger**

Dr. Ernst C. Weinger

Elisabeth Weinger

Signature

**Signature**

Date: 8/17/98